

Step Therapy Criteria  
Senior Care Plus  
Effective: 02/01/2026

## ACTINIC KERATOSIS - SCORE

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### Products Affected

- Diclofenac Sodium GEL 3%

### Details

|          |                                                           |
|----------|-----------------------------------------------------------|
| Criteria | Trial of either topical fluorouracil or topical imiquimod |
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# ANTIDEPRESSANTS - SCORE

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## Products Affected

- Auvelity
- Emsam
- Exxua
- Exxua Titration Pack
- Fetzima
- Fetzima Titration Pack

## Details

|                 |                                                                                                                                                                                                                                                                                                   |
|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Criteria</b> | Trial of two generics of the following formulary products: bupropion, mirtazapine, citalopram (tablet or solution), desvenlafaxine succinate ER, duloxetine, escitalopram, fluoxetine, fluvoxamine, paroxetine, sertraline, venlafaxine hydrochloride. Approve for continuation of prior therapy. |
|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

# ATYPICAL ANTIPSYCHOTICS - SCORE

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## Products Affected

- Fanapt
- Fanapt Titration Pack A
- Fanapt Titration Pack B
- Fanapt Titration Pack C
- Lybalvi
- Secuado

## Details

|                 |                                                                                                                                                                                                                         |
|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Criteria</b> | Trial of two of the following oral generic formulary atypical antipsychotic agents: asenapine, aripiprazole, olanzapine, paliperidone, quetiapine, risperidone, ziprasidone. Approve for continuation of prior therapy. |
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# INVEGA HAFYERA THERAPY - SCORE

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## Products Affected

- Invega Hafyera

## Details

|                 |                                                                                                                                              |
|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Criteria</b> | Trial of one of the following: Invega Sustenna or Invega Trinza. Step applies to new starts only. Approve for continuation of prior therapy. |
|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------|

## RELISTOR - SCORE

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### Products Affected

- Relistor

### Details

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|----------|--------------------------------------------------------------------|
| Criteria | Trial of lubiprostone, Constulose, Enulose, Generlac, or lactulose |
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## RYTARY - SCORE

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### Products Affected

- Rytary

### Details

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|----------|----------------------------------------------------------------|
| Criteria | Trial of one generic carbidopa/levodopa containing formulation |
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## ZONISADE SUSPENSION - SCORE

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### Products Affected

- Zonisade

### Details

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| <b>Criteria</b> | Trial of generic zonisamide capsule. Step applies to new starts only.<br>Approve for continuation of prior therapy. |
|-----------------|---------------------------------------------------------------------------------------------------------------------|

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